

Youth Service Bureau of the Illinois Valley/Hope House
Supervised Visitation & Safe Exchange Services
417 W. Madison Street, Suite 205 B
Ottawa, IL 61350
Phone 815-431-3006
Fax 630-474-0619

SUPERVISED VISITATION OR EXCHANGE REFERRAL FORM

Date: 11/30/16

Information on Referring Source:

Name of Referring Source MISKELL Law Center, LLC
Address of Referring Source 218 W. MADISON ST.
OTTAWA, IL 61350
Contact Person at Referring Source KEIGHAN FOHIS
Contact Person's Telephone No. 815 431-9300

Information on Referral:

** If contact information for either party is confidential, please do not provide this document to any other person (including the parties) or place it in a public file.

Name of Custodial Parent: JULIA ERICK MEIER
Address: 2830 - 4TH ST, LOT 13, PERU, IL 61354
Telephone: (815) 876-7479
Attorney: ERIC MISKELL

Name of Non-Custodial Parent: KEVIN KRAMER
Address: 2603 1/2 MARKET ST, PERU, IL 61354
Telephone: _____
Attorney: BOB STELL

Children:

Name	D.O.B.	Age
1. <u>Madelaine Kramer</u>		<u>3</u>
2. _____		
3. _____		
4. _____		

Service Requested:

☒ Supervised Visitation
☐ Supervised Exchange